| AMENDMENT TRANSMITTAL LETTER | | | | | | Docket No. 1190-0601PUS1 | |
|---|---|---|-----------------------------------|----------|---------------|-----------------------------|-------------|
| Application No. | | Filing Date | | | Examiner | | Art Unit |
| 10/526,401-Conf. #7072 March 2, 2005 W. J. Klimow | | | | | | cz | 2627 |
| Applicant(s): Akil | niro FUKASAW | /A | | | | | |
| Invention: DISK D | EVICE | | | | | | |
| MS Amendment Commissioner for P.O. Box 1450 Alexandria, VA 223 | 313-1450 | | | | | | |
| Transmitted here | | | | | lication. | | |
| The fee has been calculated and is transmitted as shown below. | | | | | | | |
| CLAIMS AS AMENDED | | | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | | Rate | | |
| Total Claims | 5 | - 20 = | 0 | × | 50.00 | | 0.00 |
| Independent Claims | 1 | - 3 = | 0 | х | 210.00 | | 0.00 |
| Multiple Dependent Claims (check if applicable) | | | | | | | |
| Other fee (please specify): Extension for response within first month | | | | | | 120.00 | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | | | 120.00 |
| Large Entity Small Entity No additional fee is required for this amendment. | | | | | | | |
| X Please charge Deposit Account No. 02-2448 in the amount of \$ 120.00 . A duplicate copy of this sheet is enclosed. | | | | | | | |
| A check in the amount of \$ is enclosed. | | | | | | | |
| Payment by | credit card. Fo | orm PTO-2038 | is attached. | | | | |
| X The Director | is hereby auth below. A dup | | | | | 02- | 2448 |
| x Credit ar | ny overpaymer | nt. | | | | | |
| x Charge a | ny additional fili | ng or application | n processing t | fees req | uired under 3 | 7 CFR 1.1 | 6 and 1.17. |
| a Dated: March 12, 2008 | | | | | | | |
| Michael K. Mutt Attorney Reg. N | | • | | | | | |

MKM/AMI/bms

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